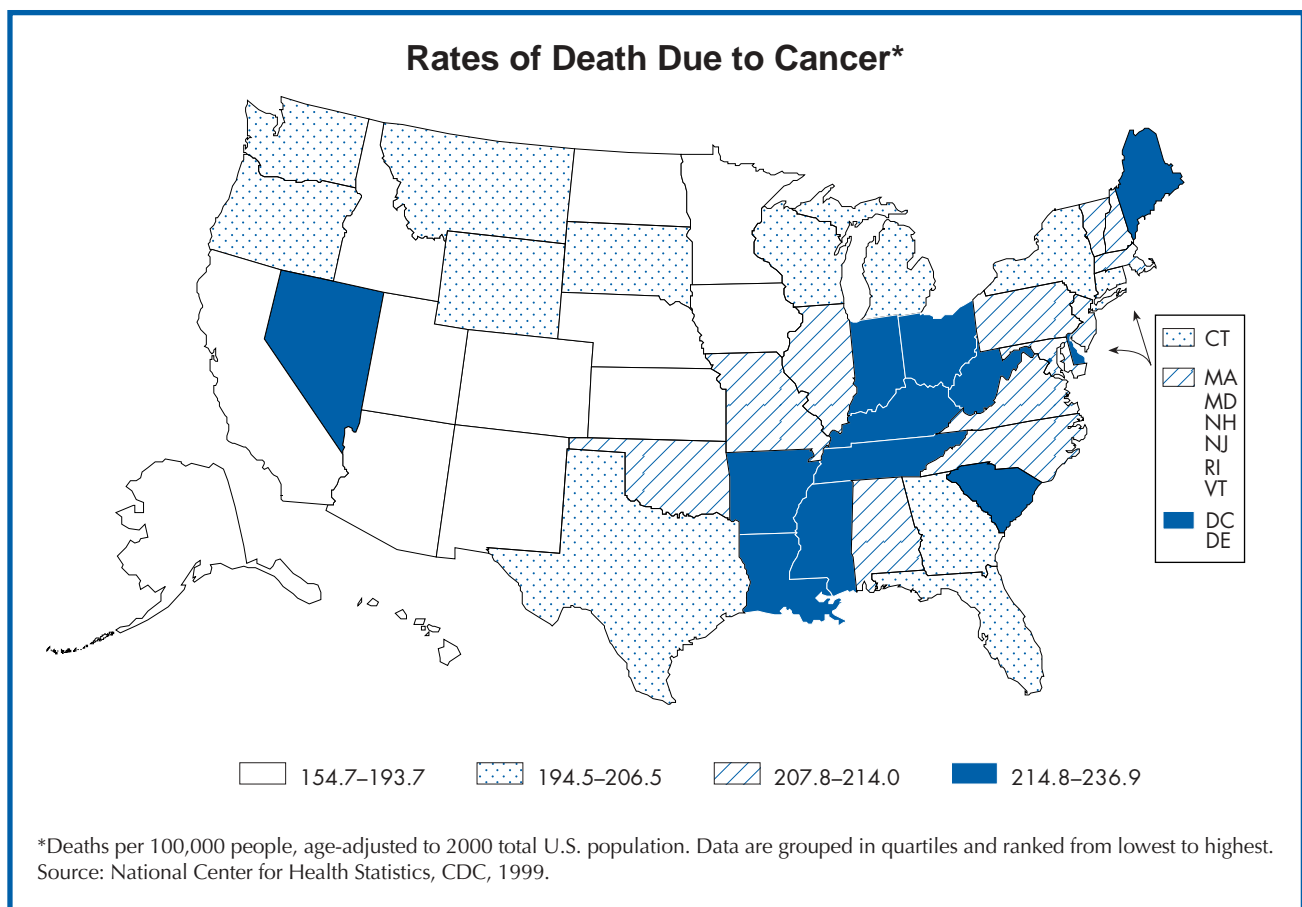




Preventing and Controlling Cancer: The Nation's Second Leading Cause of Death 2003



“CDC and our public health partners assure the delivery of the latest scientific advances in cancer prevention to all people, including those in our smallest communities. These people often live far away from the universities and research centers where discoveries about cancer are made.”

James S. Marks, MD, MPH
Director
National Center for Chronic Disease Prevention and Health Promotion

The Burden of Cancer

Deaths and New Cases

Cancer, the second leading cause of death among Americans, is responsible for one of every four deaths in the United States. In 2003, over half a million Americans—or more than 1,500 people a day—will die of cancer.

Over 17 million new cases of cancer have been diagnosed since 1990, and about 1.3 million new cases will be diagnosed in 2003 alone. This estimate does not include in situ (preinvasive) cancer or the more than 1 million cases of nonmelanoma skin cancer expected to be diagnosed this year.

Racial Differences

Cancer does not affect all races equally. Black Americans are more likely to die from cancer than people of any other racial or ethnic group. From 1992 through 1999, the average annual death rate per 100,000 people for all cancers combined was 267.3 for blacks, 205.1 for whites, 129.2 for Hispanics, and 128.6 for American Indians/Alaska Natives as well as Asians/Pacific Islanders.

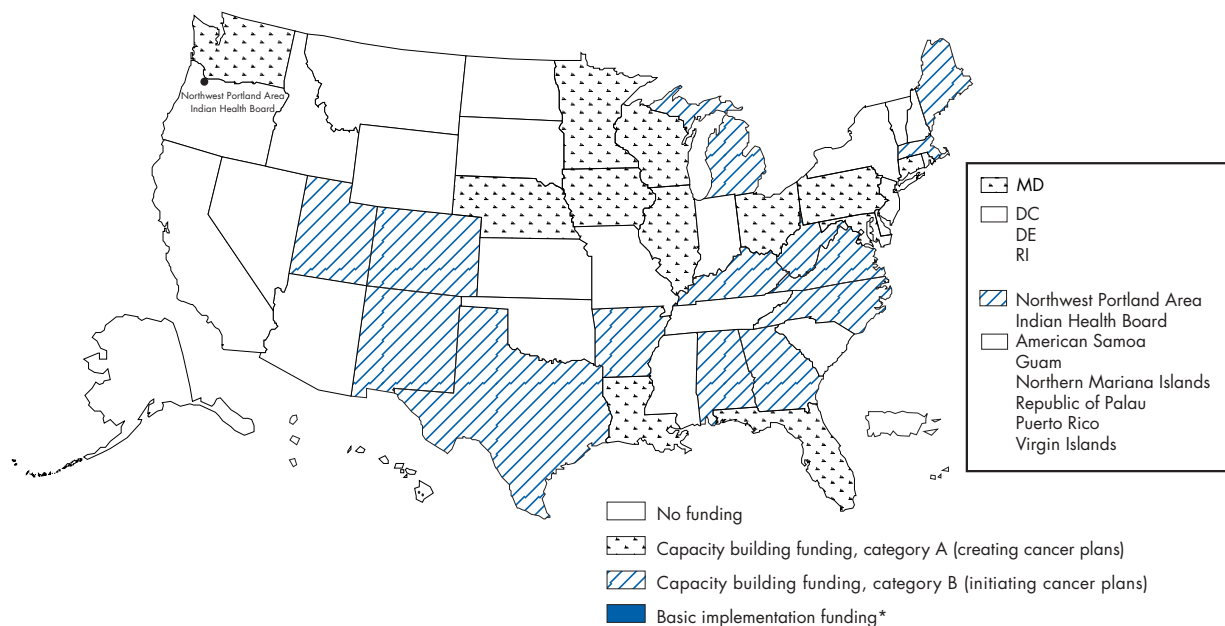
Financial Costs

The financial costs of cancer are staggering. According to the National Institutes of Health, cancers cost the United States more than \$170 billion in 2002. This includes more than \$110 billion in lost productivity and over \$60 billion in direct medical costs.

Effective Prevention Measures

The number of new cancer cases can be reduced substantially, and many cancer deaths can be prevented. Healthier lifestyles can significantly reduce a person's risk for cancer—for example, avoiding tobacco use, increasing physical activity, improving nutrition, and avoiding sun exposure. Making cancer screening and information services available and accessible to all Americans is also essential for reducing the high rates of cancer and cancer deaths. Screening tests for breast, cervical, and colorectal cancers reduce the number of deaths from these diseases by finding them early, when they are most treatable. Screening tests for cervical and colorectal cancers can actually prevent these cancers from developing by detecting treatable precancerous conditions.

CDC Funding for Comprehensive Cancer Control Programs, Fiscal Year 2002



*Currently no states are funded at this level.

CDC's Leadership in Detecting, Preventing, and Controlling Cancer

With fiscal year 2002 funding of approximately \$269 million,* CDC provides national leadership for preventing cancer and promoting its early detection. CDC works with its partners—including state and territorial health agencies, other federal agencies, voluntary and professional organizations, academia, and businesses—to carry out the following activities.

Monitoring

CDC provides funding and technical assistance to help states, territorial health agencies, and tribal organizations collect data on cancer incidence and deaths, cancer-related risk factors, and the use of cancer screening tests. They use the data to identify and track cancer trends, strengthen cancer prevention and control activities, and prioritize the use of resources.

Conducting Research and Evaluation

CDC conducts and supports studies to improve our understanding of the factors that increase a person's risk for cancer and to identify prevention

opportunities. CDC also evaluates the feasibility and effectiveness of cancer prevention and control strategies. Results from these studies are used to plan and improve cancer prevention and control activities.

Building Capacity and Partnerships

CDC works with many partners to translate basic research into public health programs, practices, and services. To ensure that these innovations reach the people who most need them, CDC helps states, territories, and American Indian health agencies build the capacity to apply scientific advances and to develop strong cancer control programs.

Education and Training

CDC develops communication campaigns and educational materials on cancer prevention for both health professionals and the public. CDC also helps its partners strengthen their education and training programs on cancers that respond to prevention and treatment measures.

CDC's Cancer Programs

CDC takes a comprehensive, broad-based approach to preventing and controlling cancers, as the following programs and initiatives demonstrate.

The National Comprehensive Cancer Control Program integrates and coordinates efforts to reduce cancer's effects through cancer monitoring, policy development, research, education, programs, services, and evaluation. With fiscal year 2002 funding, CDC provides 27 states and 1 tribal organization with support and technical assistance to plan and conduct comprehensive cancer control activities and programs. They use the funds to establish cancer coalitions, provide epidemiological support, and develop and carry out comprehensive cancer control plans. CDC and its partners also held a series of summits over the past few years to give state comprehensive cancer control leaders the chance to explore ways to launch new comprehensive cancer control programs or strengthen their existing programs.

The National Breast and Cervical Cancer Early Detection Program (NBCCEDP) has provided more than 3.5 million breast and cervical cancer screening and diagnostic tests to almost 1.5 million low-income women over the past decade. The program also supports

education and outreach activities, case management services, and research to increase screening rates. With 2002 funding, CDC supports 72 early detection programs in all 50 states, 6 U.S. territories, the District of Columbia, and 15 American Indian/Alaska Native organizations. The Breast and Cervical Cancer Prevention and Treatment Act of 2000 recently gave states the option to provide full Medicaid benefits to uninsured women under age 65 who are screened under the NBCCEDP and need treatment. In 2002, the legislation was expanded to include Native American women.

The National Program of Cancer Registries (NPCR) collects data on the occurrence of cancer; the type, extent, and location of the cancer; and the type and results of treatment. As of 2002, CDC supported cancer registries in 45 states, the District of Columbia, and 3 territories. The NPCR and the National Cancer Institute's Surveillance, Epidemiology, and End Results Program recently published *U.S. Cancer Statistics: 1999 Incidence*, which includes data on about 78% of cancers diagnosed in 1999 and state-specific cancer data from about 37 states, 6 metropolitan areas, and the District of Columbia.

*Fiscal year 2003 funding levels were not available at time of printing.

Through **colorectal cancer prevention and control initiatives**, CDC and its partners are promoting colorectal cancer screening nationwide through education and research, including studies to determine barriers to colorectal cancer screening. *The Screen for Life* campaign addresses common myths about colorectal cancer screening and educates Americans that screening saves lives by finding precancerous polyps and by detecting cancer early. *A Call to Action* educates primary care providers about prevention and early detection of colorectal cancer and offers Web-based tools that providers can use to help patients select cancer screening options.

Through **prostate cancer control initiatives**, CDC provides the public, physicians, and policymakers with the information they need to make informed decisions about the potential risks and benefits of prostate cancer screening and follow-up. For example, CDC developed a brochure for men who are thinking about being screened for prostate cancer for the first time or who just want more information about screening.

Through **skin cancer primary prevention education initiatives**, CDC supports skin cancer monitoring, research, education, and interventions. CDC recently published the *Guidelines for School Programs to Prevent Skin Cancer* to spread the word about strategies that have been proven effective in reducing skin cancer risks among students aged 5–18. CDC is working with state and local education agencies and other partners to put these strategies into practice in U.S. schools.

CDC's **ovarian cancer control initiative** is expanding the limited knowledge about ovarian cancer by working with academic and medical institutions and advocacy groups to identify factors related to the early detection and treatment of ovarian cancer. In addition, three cancer registry programs receive NPCR funds to evaluate care and outcomes for patients with ovarian cancer.

Through its **Tobacco Control Program**, CDC provides national leadership for efforts to reduce tobacco use through state and community interventions, countermarketing, policy development, surveillance,

and evaluation. CDC supports tobacco prevention and control efforts in all 50 states, 7 U.S. territories, 7 tribal-serving organizations, 9 national networks, and the District of Columbia.

Future Directions

CDC will continue to expand its support for comprehensive cancer control as the most effective means of reducing the nation's cancer burden. Future activities will include conducting research to determine how best to implement comprehensive programs, providing ongoing technical assistance and training, evaluating comprehensive cancer control programs, and expanding the number of states, territories, and tribes funded for these programs.

A State Program in Action

In Washington State, American Indian outreach workers and tribal health care providers are bringing down the barriers that once blocked American Indian women from taking advantage of Pap tests, mammograms, and clinical breast exams offered by the South Puget Intertribal Planning Agency's Native Women's Wellness Program. Because the outreach workers are highly respected and well known in their communities, they have gained the trust of the women there. The workers provide transportation and day care to make it easier for women to be screened. The results have been dramatic. In 2001, after the workers were hired, the number of women newly enrolled in the program almost doubled to 251 and the program coordinated more than 1,200 cancer screenings—the highest number of services ever. This program demonstrates the importance of finding the right community leaders who can influence people's behaviors and make a difference in their lives.

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